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		. Approved for me	PTO/068/00 (08-05 Strough 7/31/2008, OMB 0651-003
nder the Prejument Resturtion Act of 198		U.S. Patent and Trademark Officer L	1 & DECAPTION OF CONTROL
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	PAT	ENT APPLI	CATIO	N FEE DETE	NRECOR	D (Receitizated) A	TORN COL	tion or Pools.	control number.			
PATENT APPLICATION FEE DETERMINATION RECORD 8x8x8x8xx for Form PTO-676									10151	7323		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA	LENTIY	OR	OR SMALL ENTITY			
	FOR MANBER FILED MANBER EXTRA		ER EXTRA	RATE	FEE		RATE	T				
(07 CFR 1.16(1))						1, 1	٦	KAIR	- FEE			
TOTAL CLAMB GT CFR L14(m) · minus 20 · •				1 20		OR	-	+				
.NOEPENDENT COALS				~~	'	→ OR		 				
					X		_ OR	×4				
MATTPLE DEPENDENT CLASS PRESENT (87 GFR 1.14(4))						1	•	CR	<u></u> -			
"If the difference in column 1 is tess than zero, order "O" in column 2.						TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II												
]/7/0 P	(Column 1)		(Cotumn 2)	(Column 5)	SMA	TENULLA	OR	OTHE	R THAN ENTITY		
ENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIDNAL		RATE	ADDI- TRONAL		
MO	Total provensee	. 6	Minus	- 20	•	-	FEE			FEE		
3	beloperated (II O'R 1.10)3	. /	Mirrae	-3	•	X 8	┪	- OR	X 8			
¥	FIRST PRESENT	ATION OF MILE TON	E CEDEUR					OR	X4			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR L18(0)						TOTAL	-	OR	· -			
~	1-19.06					ADD'L FE	F	OR	TOTAL ADD'L FEE			
(Column 3) (Column 3)									•			
ENDMENT B	Total .	REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
ğ	Total (D GPR Lang)	- 13	Minus	20		X&		OR	X .	FEE		
Ó	(22 GFR 1, SUP))	• /	Minus	3	•			7				
AM	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDI	BIT CLASH OF CF	R 1,16(4)		· ·	- OR	X \$			
The state of the s						YOTAL		OR	TOTAL			
2	-20-6)2				ADD'L FE		OR	ADDITEE	L		
ั้ง		CLAIMS		(Column 2)	(Column 3)							
AMENDMENT (Total	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOL- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ğ	CO COR LANGE	21	Minus	30	•	×4		OR	x.50.	\$50.00		
9	GLOSS FROM		Minus		•	× •		,	X4 •	F-V.		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR L18(4))								1 "				
						TOTAL		OR	TOTAL	50-08		
* FOR entry in equant 1 in less than the control of												
** If the Technical Number Previously Paid For In THOS SPACE is less than 20, order "20".												

"If the Tighest Number Proviously Paid For" IN THIS SPACE is less than 3, white "7.

The Tighest Number Proviously Paid For" (Total or Independent) is the Island in under found in the appropriate box in coturing 1.

This octionom of Information is required by 37 CFR 1.16. The Information is required to obtain or estate a benefit by the public which is to the (and by the CSPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.14. This catalone is estimated to take 12 minutes to complete, including application, property, and submitting the completed application form to the USPTO. Then will vary depending upon the Individual cases. Any comments on the excess of the your require to complete fits form anxion applications for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Tradersent Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.